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PTO/SB/01 (12-97)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number D5118

First Named Inventor Sims, et al.

COMPLETE IF KNOWN

Application Number /

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ELECTRICAL CONNECTION MODULE

the specification of which (Title of the Invention)

☒ is attached hereto
OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
SULLIVAN, DENNIS KELLY	26,510	GILBERTO HERNANDEZ	46,483
CALFA, JEFFREY P.	37,105		
POWELL, NEIL T.	45,020		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/003 attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	INTERNATIONAL TRUCK AND ENGINE CORPORATION				
Address	455 North Cityfront Plaza Drive				
Address	Suite 1300				
City	Chicago	State	IL	ZIP	60611
Country	USA	Telephone	312-836-2311	Fax	312-836-3982

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname					
Charles D.		Sims					
Inventor's Signature	Date						
Residence: City	Springfield	State	OH	Country	USA	Citizenship	USA
Post Office Address	6233 Kelley Ave						
Post Office Address							
City	Springfield	State	OH	ZIP	45502	Country	USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Brian G.				Smith			
Inventor's Signature						Date	
Residence: City	Urbana	State	OH	Country	USA	Citizenship	USA
Post Office Address	7033 Thackery Ave						
Post Office Address							
City	Urbana	State	OH	ZIP	43078	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Stanley W.				Larison			
Inventor's Signature						Date	
Residence: City	Urbana	State	OH	Country	USA	Citizenship	USA
Post Office Address	4291 Briarwood Drive						
Post Office Address							
City	Urbana	State	OH	ZIP	43078	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

BOX PATENT APPLICATIONS
Assistant Commissioner for Patents
Washington, D.C. 20231

Express Mail No. EL613511066US

Sir:

Inventor(s): Sims, et al.
For: Electrical Connection Module
Attorney Docket No. D-5118



Enclosed are: eleven (11) sheets of formal drawings (fig 1-11)
Unsigned Declaration & Power of Attorney

The filing fee has been calculated as shown below:

FOR	No. FILED	No. ALLOWED	No. EXTRA	RATE	FEE
BASIC APPLICATION FEE					= \$ 710.00
CLAIMS	43	20	23	x 18	= \$ 414.00
INDEPENDENT CLAIMS	2	3	0	x 80	= \$ 0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED				x 270	= \$ 0.00
T O T A L					= \$ 1124.00

☒ Please charge Deposit Account No. 14-0603 in the amount of \$1,124.00.
Two duplicate copies of this sheet are enclosed.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 14-0603. A duplicate copy of this sheet is enclosed.

☒ Any additional filing fees required under 37 CFR 1.16.

☒ Any patent application processing fees under 37 CFR 1.17.

☒ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 14-0603. A duplicate copy of this sheet is enclosed.

☒ Any patent application processing fees under 37 CFR 1.17.

☐ The issue fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b).

☒ Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Chicago, Illinois 60611
Date: December 8, 2000
Telephone: (312) 836 3023

Jeffrey P. Calfa
Registration No. 37,105

14-0603 PTO 09/755845 01/05/01